

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 8, 2004

10/014,732

| | | (Column 1) | (Column 2) | (Column 3) |
|-------------------------------------------------------------------------|---------|-------------------------------------------|------------|---------------------------------------------|
| AMENDMENT | 12/26/6 | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| | | | Minus | ** 24 = 4 |
| Total | * | 28 | Minus | ** 24 = 4 |
| Independent | * | 4 | Minus | *** 4 = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | |

| | |
|-------------------------------------------|--------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$ 25= | <input type="checkbox"/> |
| X100= | <input type="checkbox"/> |
| +180= | <input type="checkbox"/> |
| TOTAL ADDIT. FEE <input type="checkbox"/> | |

| | |
|----------------------------------------------|--------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$50= | <input type="checkbox"/> |
| X200= | <input type="checkbox"/> |
| +360= | <input type="checkbox"/> |
| TOTAL ADDIT. FEE <input type="checkbox"/> pd | |

| | | (Column 1) | (Column 2) | (Column 3) |
|-------------------------------------------------------------------------|---|-------------------------------------------|------------|---------------------------------------------|
| AMENDMENT | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| | | | Minus | ** = |
| Total | * | | Minus | ** = |
| Independent | * | | Minus | *** = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | |

| | |
|-------------------------------------------|--------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$ 25= | <input type="checkbox"/> |
| X100= | <input type="checkbox"/> |
| +180= | <input type="checkbox"/> |
| TOTAL ADDIT. FEE <input type="checkbox"/> | |

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| RATE | ADDI- TIONAL FEE |
| X\$50= | <input type="checkbox"/> |
| X200= | <input type="checkbox"/> |
| +360= | <input type="checkbox"/> |
| TOTAL ADDIT. FEE <input type="checkbox"/> | |

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| Total | * | | Minus | ** = |
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| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | |

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| | | | Minus | ** = |
| Total | * | | Minus | ** = |
| Independent | * | | Minus | *** = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | |

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| +360= | <input type="checkbox"/> |